



PTO/SB/81 (09-03)
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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/783,304		
Filing Date	February 20, 2004		
First Named Inventor	Norman Herron Et. Al.		
Title	CROSS-LINKABLE POLYMERS AND ELECTRONIC DEVICES MADE WITH SUCH POLYMERS		
Art Unit	1756	Examiner Name	Unknown
Attorney Docket Number	UC0412USNA		

I hereby appoint:

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☐ Practitioner(s) named below:

Name	Registration Number

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Norman Herron		
Signature	<i>Norman Herron</i>		
Date	5/24/04	Telephone	302 695 4398

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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SIGNATURE of Applicant or Assignee of Record

Name	Gary A. Johansson
Signature	<i>Gary A. Johansson</i>
Date	5-25-04
Telephone	302-695-9324

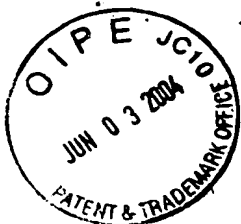
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SIGNATURE of Applicant or Assignee of Record

Name	Nora Sabina Radu		
Signature	<i>Nora Sabina Radu</i>		
Date	5-26-04	Telephone	302-695-3363

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